

GRANT AND ASSISTANCE TYPE COOPERATIVE AGREEMENT BUDGET

Recipient Name:				DURATION PROPOSED	ARS USE ONLY
				Months: _____	Months: _____
PRINCIPAL INVESTIGATOR(S) PROJECT DIRECTOR(S)				FUNDS REQUESTED BY PROPOSER	FUNDS APPROVED BY ARS (If different)
A. Salaries and Wages		ARS FUNDED WORK MONTHS			
1. No. of Senior Personnel		Calendar	Academic	Summer	
a. ____ (Co)-PI(s)/PD(s)					
b. ____ Senior Associates					
2. No. of Other Personnel (Non-Faculty)					
a. ____ Research Associates-Postdoctorate					
b. ____ Other Professionals					
c. ____ Graduate Students					
d. ____ Pre-Baccalaureate Students					
e. ____ Secretarial-Clerical					
f. ____ Technical, Shop, and Other					
Total Salaries and Wages _____ ➔					
B. Fringe Benefits (If charged as Direct Costs)					
C. Total Salaries, Wages, and Fringe Benefits (A plus B) _____ ➔					
D. Nonexpendable Equipment (Attach supporting data. List items and dollar amounts for each item.)					
E. Materials and Supplies					
F. Travel					
1. Domestic (Including Canada)					
2. Foreign (List destination and amount for each trip)					
G. Publication Costs/Page Charges					
H. Computer (ADPE) Costs					
I. All Other Direct Costs (Attach supporting data. List items and dollar amount. amount. Details of subcontracts, including work statements and budget, should be explained in full in proposal)					
J. Total Direct Costs (C through I) _____ ➔					
K. Indirect Costs (Specify rate(s) and base(s) for on off campus activity.) (Where both are involved, identify itemized costs included in on off campus bases.)					
L. Total Direct and Indirect Costs (J plus K) _____ ➔					
M. Less Residual Funds (If applicable) _____ ➔					
N. TOTAL AMOUNT of this REQUEST (L minus M) _____ ➔					
O. COST SHARING _____ ➔					

COMMENTS